

REMARKS

Claims 24-32 and 37-39 are pending in this application. Claims 1-23 and 33-36 have previously been cancelled without prejudice. Claim 24 has been amended herein. Claim 24 has been amended to clarify that the second wire guide and second introducer are advanceable independent of the first introducer from the working channel of the endoscope. New claims 38 and 39 have been added. Support for these amendments may be found throughout the specification and the figures, see for example, paragraph 0050. No new matter has been added with these amendments.

Favorable consideration and allowance are respectfully requested.

I. Claim Rejections Under 35 U.S.C. §103

A. Claims 24, 25 and 37

Claims 24, 25 and 37 have been rejected under 35 U.S.C. §103(a) as being unpatentable over Hilaire et al. (U.S. (2005/0085845) in view of Colgan et al. (U.S. 2003/0040789).

Applicants respectfully traverse the rejection based on Hilaire et al. in view of Colgan et al. Applicants respectfully request reconsideration of the rejected claims in light of the traversals and the claim amendment discussed below.

Applicants' claim 24 requires that the second wire guide and second introducer are advanceable independent of the first introducer. The first introducer is advanced over the first wire guide from the working channel of the endoscope to the main lumen and the branch lumen. The second introducer is advanced over the second wire guide from the working channel to the main lumen and second branch lumen independent of the first introducer. Hilaire et al. in view of Colgan et al. fail to teach or suggest these elements.

Hilaire et al. is directed to a catheter system including a releasable linking device for holding the first and second balloon catheter in a side-by-side configuration and aligned with one another along a longitudinal axis. "The linking device allows the catheters to be moved as a unit." (Abstract.) The linking device allows the catheter system to be advanced as a unit and helps prevent premature or inadvertent dislodgement of the stent from the catheters. (Summary of the Invention, paragraphs 53 and 55.) Hilaire et al.

describes the advantage of the present invention of the "kissing balloons" technique that has previously been described as follows: "An advantage of the present invention over prior methods is that the linking device 160 allows the catheter system 100 to be advanced as a unit and helps prevent premature or inadvertent dislodgement of the stent 150 from the catheters." (Paragraph 0073.) Once the stent 150 has been deployed, both balloons are deflated and the catheter system withdrawn or once the stent 150 has been deployed, the balloon catheters can be released from the linking device 160 and used separately. (Paragraph 0074.) Clearly, Hilaire et al. teaches delivering the stent 150 using the linking device 160 to advance the catheter system 100 as a unit so that the first and second catheters 102, 104 are advanced together to deliver the stent 150.

Hilaire et al. teaches away from advancing the second wire guide and second introducer independent of the first introducer from the working channel to the main lumen and second branch lumen as claimed in claim 24. In addition, as acknowledged by the Examiner, Hilaire et al. fails to teach or suggest that the first and second introducers are in a staggered, adjacent, configuration in a working channel of an endoscope. (Page 4, first paragraph, February 3, 2009, Office Action.)

Colgan et al. has been cited for placing an introducer retaining a stent in a working channel of an endoscope. As discussed in the response dated September 15, 2008, Colgan et al. is directed to a **single** catheter having a single **stent** mounted at the distal end. Colgan et al. is directed to modifying the stent design to reduce the constrained diameter of the single stent. (Paragraphs 0006 and 0007.) Colgan et al. does not teach or suggest a first AND a second introducer. Colgan et al. further fails to teach or suggest that the first and second introducers are in a staggered, adjacent, configuration in a working channel of an endoscope. Clearly, Colgan et al. and Hilaire et al. together and individually, fail to teach or suggest advancing the second wire guide and second introducer independent of the first introducer from the working channel to the main lumen and second branch lumen.

Thus, Applicants respectfully request the rejection of claims 24, 25 and 37 under 35 U.S.C. §103(a) be withdrawn.

B. Claims 26 and 27

Claims 26 and 27 have been rejected under 35 U.S.C. §103(a) as being unpatentable over Vardi et al. (2001/0003161) in view of Colgan et al.

Applicants respectfully traverse the rejection of claims 26 and 27 based on Vardi et al. in view of Colgan et al. Applicants respectfully request reconsideration of the rejected claims in light of the traversals discussed below.

Applicants' claim 26 requires that the second wire guide is advanceable external to and independent of the first stent. Claim 26 also requires that the first and second introducers are in a staggered, adjacent, configuration in a working channel of an endoscope. Vardi et al. in view of Colgan et al. fail to teach or suggest these elements.

Vardi et al. has been discussed previously and is directed to a system for deploying a stent at a bifurcation wherein the second stent is positioned through the lumen and an opening in the first stent. In addition, Vardi et al. teaches away from positioning two separate wire guides through the primary vessel as described in the background at paragraph 0006, where "Unfortunately, when attempting to guide two such separate guide wires through the primary vessel such that one enters the branch vessel, the two guide wires typically tend to wrap around one another and become entangled. Additionally, time and effort is required to individually position each of the two guidewires one after the other." Vardi et al. also describes "An advantage of the present dual lumen catheter system is that it avoids having to separately position first and second guidewires within the respective primary and branch vessels prior to deployment of primary and branch stents thereover." (Paragraph 0008.) The second wire guide, catheter and stent of Vardi et al. all must be delivered through the first expanded stent to access the branch lumen. (See paragraph 0035.) Clearly, Vardi et al. teaches away from a second wire guide that is advanceable external to and independent of the first stent. Vardi et al. also fails to teach or suggest placing the first wire guide into the main lumen and the first branch lumen of the bifurcation and placing the second wire guide into the main lumen and the second branch lumen. As acknowledged by the Examiner, Vardi et al. fails to disclose placing the staggered, adjacent introducers in a working channel of an endoscope. (*Id.*, page 6.)

Colgan et al. has been cited for placing an introducer retaining a stent in a working channel of an endoscope. As discussed above, Colgan et al. does not teach or suggest a first AND a second introducer. Colgan et al. further fails to teach or suggest that the first and second introducers are in a staggered, adjacent, configuration in a working channel of an endoscope. Clearly, Colgan et al. and Vardi et al. together and individually, fail to teach or suggest a second wire guide that is advanceable external to and independent of the first stent and that the first and second introducers are in a staggered, adjacent, configuration in a working channel of an endoscope.

Therefore, Applicants respectfully request the rejection of claims 26 and 27 under 35 U.S.C. §103(a) be withdrawn.

C. Claims 28-32

Claims 28-32 have been rejected under 35 U.S.C. §103(a) as being unpatentable over Vardi et al. in view of Colgan et al. and Shakhovich (U.S. 5,669,924).

Applicants respectfully traverse the rejection based on Vardi et al., Cogan et al. and Shakhovich. Applicants respectfully request reconsideration of the rejected claims in light of the traversals.

Applicants' claim 26 requires that the first and second introducers be disposed in a staggered, adjacent configuration in a working channel of an endoscope wherein the first stent is disposed distal to the second stent, the staggered, adjacent configuration having an overall diameter that is less than the sum of a first distal portion diameter and a second distal portion diameter. Claim 30 requires that a first stent and a second stent are provided in a staggered, adjacent, independently advanceable configuration in a working channel of an endoscope wherein the first stent is distal to the second stent; the staggered, adjacent configuration having an overall diameter that is less than the sum of adjacent first stent portion and second stent portion diameters.

As acknowledged by the Examiner, Shakhovich fails to disclose the step of placing the first and second introducers in a staggered, adjacent configuration. (May 13, 2008 Office Action, page 5.) Vardi et al. and Colgan et al. have been discussed above and also fail to disclose placing the first and second introducers in a staggered, adjacent configuration. None of the references cited by the Examiner, together or individually teach

or suggest placing the first and second introducers in a staggered, adjacent configuration in a working channel of an endoscope.

Applicants respectfully request the rejection of claims 28-32 under 35 U.S.C. §103(a) be withdrawn.

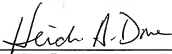
II. SUMMARY

Having carefully addressed the Examiner's rejections, Applicants respectfully assert that the application is in condition for allowance. Allowance of the present claims is earnestly solicited.

Should the Examiner wish to discuss any of the above submissions in more detail, the Examiner is asked to please call the undersigned at the telephone number listed below.

Respectfully submitted,

Dated: May 4, 2009



Heidi A. Dare
Registration No. 50,775
Attorney for Applicants

BRINKS HOFER GILSON & LIONE
P.O. BOX 10395
CHICAGO, IL 60610
(312)321-4200